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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/302,338 06/28/2001 *mm*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*NONE*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 07/03/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY AZ	SHEETS DRAWING 4	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>mm</i>				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

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## TITLE

Suturing apparatus, method and system

FILING FEE  RECEIVED 968	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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